



# WORKING WITH FAITH COMMUNITIES TO COUNTER DISCRIMINATION AND STIGMA January 28, 2004

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(Moderator for this call is Jennifer Bofinger.)



## Speakers

Kris Flaten, M.Div., consumer advocate and chair of the Minnesota State Advisory Council on Mental Health

Rabbi Richard Address, D.Min., director, Union of American Hebrew Congregations, Department of Jewish Family Concerns

Michael Blank, Ph.D., assistant professor, Center for Mental Health Services Policy and Research, Department of Psychiatry, University of Pennsylvania

# First-Person Perspective

**“As I first struggled with the symptoms of my illness, I turned to my faith tradition for support - but also for a way to understand what was happening to me.”**



# First-Person Perspective

**I am not alone.**

**Understanding that someone living thousands of years ago had felt similar feeling (Psalm 69)**

**No matter what, I belong.**

**Even if other members of my faith don't understand me, I know this.**

**God is always there.**



# First-Person Perspective/Cultivating Hope



•Prayer—talking to God. Keeping the lines of communication open.



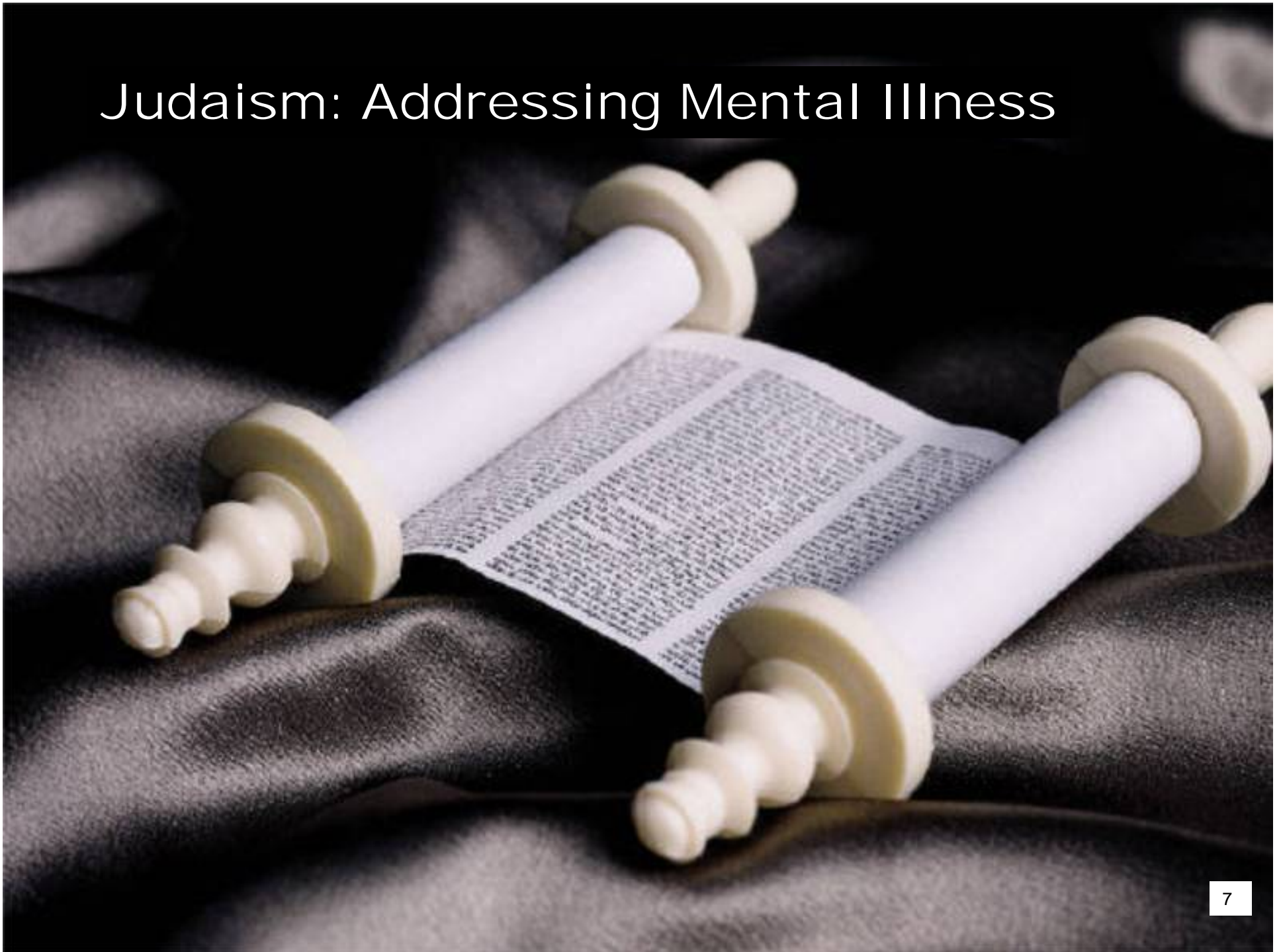
•Giving thanks. I try to encourage myself to feel grateful and blessed by noticing and paying attention to the kind things that happen each day.



•Giving to others. I have less than a lot of other people. I have more than a lot of other people.

We all have something that we can give.

# Judaism: Addressing Mental Illness



# Judaism: Addressing Mental Illness

Judaism acknowledges a distinction between mental and physical health. However, tradition treats them on an equal plane, recognizing that both a healthy body and a healthy mind are necessary for human beings to be complete.





# Judaism: Addressing Mental Illness

- Research indicates the importance of clergy and faith communities for both consumers and families in dealing with issues of mental health.
- Issues such as cost, convenience and community.



# Judaism: Historical Meaning

- Trances experienced by Biblical prophets, proof of divine contact, came to be viewed as signs of illness
- Concept of shoteh
- In Halachah, rabbis of Talmud exempted those with mental illnesses from responsibility; Talmud permitted violations of Sabbath to spare psychic anguish
- Focus on prevention (Book of Proverbs, Pirkei Avot)



# Judaism: Challenges

- Mental illness stigmatized and often ignored within Jewish faith
- Traditionally prized the life of the mind and extolled intellectual achievement
- Mindset of Jews as they approach prayer



# Judaism: Hope

- Hope is a central Jewish value.
- Concept of slavery to freedom, bondage to liberation

“Recovery ... is based upon the empowerment of the survivor and the creation of new connections. Recovery can take place only within the context of relationships; it cannot occur in isolation.”



# Judaism: R'Fuat HaNefesh

- *Caring for the Soul* grew out of several years of work with families and congregations.
- Increase in interactions that had mental health overlay



# Judaism: What Congregations Can Do\*

- Ascertain rabbi's views on mental illness
- Volunteer training
- Organize a focus group or task force
  - Identify members of the congregation who have personal concern and knowledge.
  - Identify need for programs



*\*All suggestions taken from R'fuat HaNefesh*

# Judaism: What Congregations Can Do\* (cont.)

- Establish group's identity
  - Agree on terminology, basic halachic perspectives
- Assess needs, catalog strengths
- Consider what is possible
- Present to congregation's board
- Implement long-term strategies
- Train volunteers



*\*All suggestions taken from R'fuat HaNefesh*

# Rural and Urban Churches: Black and White Congregations

The following text is taken from  
“Alternative Mental Health Services: The  
Role of the Black Church in the South,” a  
study conducted by Michael Blank, et al.



# Rural and Urban Churches: Black and White Congregations

- Focus on religious leaders has grown out of findings that paraprofessional counselors are often as effective as professionals in fostering positive change.
- Study focused on extent to which churches in the South were providing mental health care services to congregations and had established linkages with formal systems of care.
- 269 pastors from Southern churches interviewed.



## Background – What we know

- Lack of effective care in rural areas.
- Interaction between race and attitudes greatly affects an individual's decision to seek mental health care.
- Stigma a powerful predictor of poor utilization of care.
- Stigma may increase reliance on social support and informal care networks.



## Background – What we know (cont.)

- Blacks are more tolerant of psychological distress, less likely to initiate treatment.
- Fear and stigma may lead rural Blacks to minimize symptoms and rely on informal support systems.



# Results

- An environment of distrust has developed between mental health professionals and church leaders. (Lack of communication exists.)
- Blacks at a disadvantage if they need mental health services.
- Rural individuals reluctant to seek help.
- Lack of available services and the stigma associated with mental health problems in rural areas are complex problems.



## Results (cont.)

- Few links between churches and formal provider systems found, irrespective of location or racial composition of church.
- Black and White churches perceive their missions differently.
- Black churches reported providing more services than did White churches regardless of urban or rural location.



# Suggestions

- Link pastors and other church leaders to primary care providers.
- Future efforts at building coalitions between providers of health and mental health services and faith communities should focus on this absence of communication.





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*For more information and resources, visit [www.adscenter.org](http://www.adscenter.org), click on Resources, click on Issues, and go to Faith.*

*A copy of "Building Bridges: Mental Health Consumers of Faith-Based and Community Organizations in Dialogue," will soon be available through NMHC at [www.mentalhealth.org](http://www.mentalhealth.org).*

